PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number
1260 · OS
09-784148

CLAIMS AS FILED - PA (Column 1)					(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			20		A Comment of the same of the s		r	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	Ī	BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		. 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS) minus 3 =		. 8			X40=		OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM P	RÉSENT				Ī	+135=		OR	+270=	
* If	the difference	in column 1 is	less than zero, enter "0" in colum			olumn 2	L	TOTAL	351	OR	TOTAL	·
CLAIMS AS AMENDED - PART II											OTHER	
	e s iterativa de la companya e mal	(Column 1) CLAIMS		(Colu		(Column 3)		SMALL		OR	SMALL	ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	T CL AIM	=		X40=		OR	X80=	
	THOTTHEOL	MATION OF M	DETIT EE DET	LINDLIN	OLANI			+135=		OR	+270=	
								TOTAL		OR	TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3)	Α	DDIT. FEE		, ,	ADDIT. FEE	
	संस्था स्टब्स्टर	CLAIMS	CHANGE THE		HEST	(Column 3)	Г		ADDI-	ì		4551
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	ſ	X40=		OR	X80=	-
L	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM			+135=		OR	+270=	
							L	TOTAL			TOTAL	
		9.1.					Α	DDIT. FEE		OR	ADDIT. FEE	
_		(Column 1)			mn 2)	(Column 3)						
AMENDMENT C	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	}
AME	Independent	*	Minus	***	- 01 4114	=		X40=		OR	X80=	
	TIHS! PHESE	NTATION OF M	ULTIPLE DEF	FNDEN	LAIM			+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		mber Previously P ber Previously Pa							propriate box			